THIS SECTION FOR	Fee Check Number		Date Receipted		Personal Info	Receipted By	
OFFICIAL USE ONLY	Unformation (D)					.	
Item #1 Personal	I Information (Please print your name exact	iy as you	want it to appear	r on the	certificate.)	
Name	Soc Security # Birth Date						
Maiden or Previous Name Street and/or PO Box			Phone				
City, State, Zip Code			Phone	e #	(circle one)	Male	Female
	tes: List the certificate(s) for which you are ap	nlvina (i e	Standard Flementa	arv Admi			
	to a current certificate are being requested,						
Certificate #1	to a current certificate are being requested,	picase w	THE OANE OF	i tile ili	ot inic.		
Certificate #2							
Certificate #3							
Item #3 Endorse	ments: If you are requesting new endorseme	ents at this	s time, please lis	t the er	ndorsement	s here.	
	to a current certificate are being requested,		· ·				
Endorsement #1	Endorsement #4						
Endorsement #2	Endorsement #5		ement #5				
Endorsement #3		Endorse	ement #6				
Item #4 Educatio	onal Institutions: Renewal applicant must h	ave earne	ed at least six (6) seme:	ster credits	during the	
validity peri	iod of the credential (9/1/01-9/1/06). List only so	chools wh	ere these recent	credits	were earne	ed.	
College/University Name Years Atte					ars Attended (in last five yea	ars)
a.							
b.							
c.							
d.							
Item #5 Teaching Assignment for the upcoming school year to be starting in September.							
a. Do you anticipate having a signed contract with an Idaho K-12 school for the upcoming school year? Circle one.						YES	NO
b. If you answered YES, will it be a public school? Circle one. (If you circled NO above, disregard this question.)						YES	NO
c. To the best of your knowledge, what will your assignment be? Please be specific (e.g. 6th grade English, elem principal, etc.)							
-							
d. Have you completed the Idaho Comprehensive Literacy Course from an approved provider? Circle one.					YES	NO	
e. Have you successfully completed an Idaho Technology Competency Assessment? Circle one.					YES	NO	
	More information is required of						
	rtification Irregularities or Legal Conv						
	Idaho Professional Education Credential requir				our (4)		
questions about prior of	certification irregularities or legal convictions (ot	her than r	ninor traffic viola	itions).			
1 Have you ever had	d a teaching certificate revoked, suspended,	donied	or have you eve	ar volu	ntarily rolir	•	
-	g certificate to avoid revocation proceedings		-	er voiu	illarily reili	1-	
quistica a teaching	g certificate to avoid revocation proceeding.	3 111 011011	ici state:		(circle one)	YES	NO
					(011010 0110)		
2. Is there any action	n pending against your certificate or your ap	plication	in another stat	e?			
					(circle one)	YES	NO
		_					
	en convicted of any felony or misdemeanor i	-		nilitary		\/F0	NO
(see NOTE 2 below	v) (Do not include convictions for minor tra	attic violatio	ons.)		(circle one)	YES	NO
4. Are you currently	under investigation or facing pending crimi	nal charo	es in Idaho or i	n anv a	other state	?	
(see NOTE 2 below		Unian g	01 1		(circle one)	YES	NO
	•				,/	-	-
Ī							

If the answer is **YES** to any of the questions 1-4 above, the following applies:

1) A personal written explanation must accompany this application;

NOTE:

- 2) If your misdemeanor conviction is less than five (5) years old, relevant court documents must accompany this application;
- 3) All felony convictions require relevant documents from the arresting law enforcement agency and the court that oversaw the final disposition.

NOTE:

For the purposes of questions 3 and 4 above, conviction means:

- 1. All instances in which a plea of guilty or nolo contendere is the basis of conviction;
- 2. All proceedings in which a sentence has been suspended, deferred, or withheld; and,
- 3. All proceedings in which the prosecution was deferred.

I attest and affirm that I have read the **Code of Ethics for Idaho Professional Educators.** (For a copy of the Code, refer to www.sde.state.id.us/certification.)

My signature on this application attests and affirms that all statements made by me on this application are true and correct to the best of my knowledge.

I understand that entry of false information on the application may result in denial of my application or revocation of my certificate.

Signature of Applicant Da

RETURN FORM, TRANSCRIPTS AND \$75 FEE IN ONE PACKET TO:

Idaho State Department of Education Bureau of Certification & Professional Standards PO Box 83720 Boise, ID 83720-0027

1/3/06